

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002741

FILED
Apr 21, 2010
Secretary of State

Entity Name: MINNESOTA ARCHITECTURAL ALLIANCE, INC.

Current Principal Place of Business:

400 CLIFTON AVE., S.
MINNEAPOLIS, MN 55403

New Principal Place of Business:

Current Mailing Address:

400 CLIFTON AVE., S.
MINNEAPOLIS, MN 55403

New Mailing Address:

FEI Number: 41-0963427

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDC
Name: BRENDALLEN, CAREY
Address: 400 CLIFTON AVE., S.
City-St-Zip: MINNEAPOLIS, MN 55403

Title: VDC
Name: LA FRANCE, DENNIS W
Address: 400 CLIFTON AVE., S.
City-St-Zip: MINNEAPOLIS, MN 55403

Title: STDC
Name: ELLSWORTH, CYNTHIA L
Address: 400 CLIFTON AVE., S.
City-St-Zip: MINNEAPOLIS, MN 55403

Title: VDC
Name: VESTERHOLT, PETER
Address: 400 CLIFTON AVE S
City-St-Zip: MINNEAPOLIS, MN 55403

Title: VDC
Name: PETERSON, ERIC
Address: 400 CLIFTON AVE S
City-St-Zip: MINNEAPOLIS, MN 55403

Title: VDC
Name: DEANGELO, THOMAS
Address: 400 CLIFTON AVE S
City-St-Zip: MINNEAPOLIS, MN 55403

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CYNTHIA ELLSWORTH

STDC

04/21/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date